### Case 16-36354 Doc 1 Filed 11/15/16 Entered 11/15/16 12:24:39 Desc Main Document Page 1 of 52

| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION |                               |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | ☐ Chapter 11                  |                                 |
|   | ☐ Chapter 12                  |                                 |
|   | ☐ Chapter 13                  | Check if this an amended filing |

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself  |   |   |   |
|-----|--|---|---|---|
|     |  | About Debtor 1:                                 | About Debtor 2 (Spouse Only in a Joint Case): |   |
| 1.  | Your full name   |   |   |   |
|     | Write the name that is on your government-issued picture identification (for   | Rick<br>First name                              | First name                                    | - |
|     | example, your driver's license or passport).   | Middle name                                     | Middle name                                   | - |
|     | Bring your picture identification to your meeting with the trustee.  | Nelson Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      | - |
| 2.  | All other names you have used in the last 8 years  | ,   |   |   |
|     | Include your married or maiden names.  |   |   |   |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-2666                                     |   |   |

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Case number (if known) Debtor 1 Rick Nelson

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |  |
|----|--|---|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs.  Business name(s)  | ☐ I have not used any business name or EINs.  Business name(s)   |  |
|    |  |   |  |  |
| 5. | Where you live   | 5704 Breezeland Rd.   | If Debtor 2 lives at a different address:  |  |
|    |  | Carpentersville, IL 60110  Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code   |  |
|    |  | Kane County   | County   |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |  |
| 6. | Why you are choosing   | Check one:  | Check one:   |  |
|    | this district to file for bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |  |
|    |  |   |  |  |

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Case number (if known) Debtor 1 Rick Nelson

| ar  | t 2: Tell the Court About   | our E     | 3ankruptcy Ca  | ise                                   |  |   |                |
|-----|---|-----------|----------------|---------------------------------------|--|---|----------------|
| 7.  | The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |           |                |                                       | nkruptcy   |   |                |
|     | choosing to file under  | Chapter 7 |                |                                       |  |   |                |
|     |   |           | Chapter 11     |                                       |  |   |                |
|     |   |           | Chapter 12     |                                       |  |   |                |
|     |   |           | Chapter 13     |                                       |  |   |                |
|     |   |           |                |                                       |  |   |                |
| 3.  | How you will pay the fee  |           | about how yo   | ou may pay. Typio<br>attorney is subm | cally, if you are paying the fee yo                              | k with the clerk's office in your local court for mourself, you may pay with cash, cashier's checkalf, your attorney may pay with a credit card or          | k, or money    |
|     |   |           |                |                                       | <b>Illments.</b> If you choose this option (Official Form 103A). | on, sign and attach the Application for Individua   | als to Pay     |
|     |   |           | but is not req | uired to, waive yo                    | our fee, and may do so only if yo                                | n only if you are filing for Chapter 7. By law, a j<br>ur income is less than 150% of the official pov<br>n installments). If you choose this option, you n | erty line that |
|     |   |           |                |                                       |  | sial Form 103B) and file it with your petition.   | nast nii oat   |
| ).  | Have you filed for bankruptcy within the  | ■ N       | lo.            |                                       |  |   |                |
|     | last 8 years?   | ПΥ        | es.            |                                       |  |   |                |
|     |   |           | District       |                                       | When   |   |                |
|     |   |           | District       |                                       | When   |   |                |
|     |   |           | District       |                                       | When   | Case number   |                |
| 10. | Are any bankruptcy cases pending or being   | ■ N       | lo             |                                       |  |   |                |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate?   | ПΥ        | es.            |                                       |  |   |                |
|     |   |           | Debtor         |                                       |  | Relationship to you   |                |
|     |   |           | District       |                                       | When   | Case number, if known   |                |
|     |   |           | Debtor         |                                       |  | Relationship to you   |                |
|     |   |           | District       |                                       | When   | Case number, if known   |                |
| 11. | Do you rent your  | N         | lo. Go to li   | ine 12.                               |  |   |                |
|     | residence?  | ■ Y       | es Has yo      | our landlord obtain                   | ned an eviction judgment agains                                  | et you and do you want to stay in your residenc   | e?             |
|     |   |           | ■              | No. Go to line 1                      | 2.   |   |                |
|     |   |           | _              |                                       | ial Statement About an Eviction                                  | Judgment Against You (Form 101A) and file it  | with this      |
|     |   |           |                |                                       |  |   |                |

| Debt | Case 16-3 or 1 Rick Nelson  | 36354       | Doc 1               | Filed 11/15/16<br>Document                             | Entered 11/15/16 12:24:39 Page 4 of 52 Case number (if known)  | Desc Main                          |
|------|---|-------------|---------------------|--|--|------------------------------------|
| Part | 3: Report About Any Bu  | ısinesses Y | ′ou Own a           | s a Sole Proprietor                                    |  |                                    |
| 2.   | Are you a sole proprietor of any full- or part-time business?   | ■ No.       | Go to Pa            | art 4.   |  |                                    |
|      |   | ☐ Yes.      | Name a              | nd location of business                                |  |                                    |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |             | Name of             | business, if any                                       |  |                                    |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |             | Number              | Street, City, State & ZIP                              | Code   |                                    |
|      | it to this petition.  |             |                     | ne appropriate box to des                              | •  |                                    |
|      |   |             | _                   | ,  | defined in 11 U.S.C. § 101(27A))   |                                    |
|      |   |             |                     | Single Asset Real Estate (                             | (as defined in 11 U.S.C. § 101(51B))   |                                    |
|      |   |             |                     | Stockbroker (as defined in                             | 11 U.S.C. § 101(53A))  |                                    |
|      |   |             |                     | Commodity Broker (as def                               | fined in 11 U.S.C. § 101(6))   |                                    |
|      |   |             | 1 🗆                 | None of the above                                      |  |                                    |
| 3.   | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines.  | . If you indi       | cate that you are a small be statement, and federal in | ust know whether you are a small business de<br>pusiness debtor, you must attach your most re<br>acome tax return or if any of these documents | ecent balance sheet, statement of  |
|      | For a definition of small   | ■ No.       | I am not            | filing under Chapter 11.                               |  |                                    |
|      | business debtor, see 11 U.S.C. § 101(51D).  | □ No.       | I am filin<br>Code. | g under Chapter 11, but I                              | am NOT a small business debtor according t   | o the definition in the Bankruptcy |
|      |   | ☐ Yes.      | I am filin          | g under Chapter 11 and I                               | am a small business debtor according to the  | definition in the Bankruptcy Code. |
| lor4 | A Banart if You Com ar  | Hove Are    | Uozordo:::          | Droposty or Any Dropo                                  | rty That Noods Immediate Attention   |                                    |

#### 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

|   | No. |  |
|---|-----|--|
| _ |     |  |

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Case number (if known) Debtor 1 Rick Nelson

Part 5:

**About Debtor 1:** 

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Rick Nelson Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Rick Nelson Signature of Debtor 2 **Rick Nelson** Signature of Debtor 1 Executed on Executed on November 14, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Rick Nelson Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Stephen J. Costello                | Date          | November 14, 2016     |
|--|---------------|-----------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY        |
| Stephen J. Costello                    |               |                       |
| Printed name                           |               |                       |
| Costello & Costello                    |               |                       |
| Firm name                              |               |                       |
| 19 N. Western Ave. (RT 31)             |               |                       |
| Carpentersville, IL 60110              |               |                       |
| Number, Street, City, State & ZIP Code |               |                       |
| Contact phone <b>847-428-4544</b>      | Email address | steve@costellolaw.com |
| 6187315                                |               |                       |
| Bar number & State                     |               |                       |

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|                        |                          | Docum             | SIL TAUC O OI JZ          |      |                                      |
|------------------------|--------------------------|-------------------|---------------------------|------|--------------------------------------|
| Fill in this infor     | mation to identify your  | case:             |                           |      |                                      |
| Debtor 1               | Rick Nelson              |                   |                           |      |                                      |
|                        | First Name               | Middle Name       | Last Name                 |      |                                      |
| Debtor 2               |                          |                   |                           |      |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name                 |      |                                      |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS, EASTERN DIVI | SION |                                      |
| Case number (if known) |                          |                   |                           |      | ☐ Check if this is a                 |
| (ii kilowii)           |                          |                   |                           |      | ☐ Check if this is an amended filing |
|                        |                          |                   |                           |      | arrichaca ming                       |

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|    |   | 3.5          |                               |
|----|---|--------------|-------------------------------|
|    |   | Your a       | ssets<br>of what you own      |
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B   | \$           | 0.00                          |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B  | \$           | 17,310.00                     |
|    | 1c. Copy line 63, Total of all property on Schedule A/B   | \$           | 17,310.00                     |
| Pa | rt 2: Summarize Your Liabilities  |              |                               |
|    |   |              | <b>abilities</b><br>t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$           | 33,000.00                     |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$           | 0.00                          |
|    | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$           | 58,845.00                     |
|    | Your total liabilities  | \$           | 91,845.00                     |
| Pa | rt 3: Summarize Your Income and Expenses  |              |                               |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I   | \$           | 5,493.28                      |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J   | \$           | 5,464.40                      |
| Pa | rt 4: Answer These Questions for Administrative and Statistical Records   |              |                               |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                    | ur other sch | nedules.                      |
| 7. | ■ Yes What kind of debt do you have?  |              |                               |

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Case number (if known) Debtor 1 Rick Nelson

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

6,472.92 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | aim  |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

Case 16-36354 Doc 1 Filed 11/15/16 Entered 11/15/16 12:24:39 Desc Main Page 10 of 52 Document Fill in this information to identify your case and this filing: Debtor 1 Rick Nelson Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chevrolet Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **Traverse** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2014 Debtor 2 only Current value of the Current value of the 29000 Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: ☐ At least one of the debtors and another \$16,000.00 \$16,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$16,000.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Case 16-36354 Filed 11/15/16 Entered 11/15/16 12:24:39 Document Page 11 of 52 Debtor 1 Case number (if known) **Rick Nelson** Yes. Describe..... \$900.00 Furniture, Furnishings and Supplies 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$100.00 Television, misc electronics 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No Yes. Describe..... \$100.00 Handgun 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$185.00 **Necessary Wearing Apparel** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,285.00 for Part 3. Write that number here .....

**Describe Your Financial Assets** 

Do you own or have any legal or equitable interest in any of the following?

Doc 1

Current value of the portion you own? Do not deduct secured

Desc Main

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| Debtor 1              | Rick Nelson  |  |                                 | Case number (if known)                         |                             |
|-----------------------|--|--|---------------------------------|--|-----------------------------|
|                       |  |  |                                 |  | claims or exemptions.       |
| ■ No                  |  | our wallet, in your home, in a   |                                 | and when you file your petition                | n                           |
|                       |  | r other financial accounts; cer<br>ve multiple accounts with the   |                                 | in credit unions, brokerage ho                 | ouses, and other similar    |
| ■ Yes                 |  | In   | stitution name:                 |  |                             |
|                       | 17.1.  | <u>c</u>   | hecking at PNC Bank             |  | \$25.00                     |
|                       | s, mutual funds, or public   | sly traded stocks<br>ent accounts with brokerage f   | irms, money market accoun       | uts  |                             |
| ■ No<br>□ Yes         |  | Institution or issuer name:  |                                 |  |                             |
|                       | oublicly traded stock and venture  | interests in incorporated ar   | nd unincorporated busine        | sses, including an interest                    | in an LLC, partnership, and |
|                       | . Give specific information Nar  | about them   |                                 | % of ownership:                                |                             |
| Nego<br>Non-i<br>■ No | ntiable instruments include properties are included instruments are included. Give specific information in the included in the included in the included in the included included in the included included in the included in | nds and other negotiable are personal checks, cashiers' chethose you cannot transfer to see about them uer name: | ecks, promissory notes, and     | d money orders.                                |                             |
|                       | ement or pension account<br>apples: Interests in IRA, ERIS   |  | rift savings accounts, or oth   | er pension or profit-sharing p                 | lans                        |
| ☐ Yes                 | . List each account separat<br>Type  |  | stitution name:                 |  |                             |
| Your<br><i>Exam</i>   |  | s you have made so that you  |                                 | se from a company<br>elecommunications compani | es, or others               |
| ■ No<br>□ Yes         |  | In   | stitution name or individual:   |  |                             |
| _                     | ities (A contract for a period   | dic payment of money to you,   | either for life or for a number | er of years)                                   |                             |
| ■ No<br>□ Yes         | Issuer nam   | e and description.   |                                 |  |                             |
|                       | sts in an education IRA, in s.C. §§ 530(b)(1), 529A(b),  |  | ABLE program, or under a        | a qualified state tuition prog                 | gram.                       |
|                       | Institution r  | name and description. Separa   | ately file the records of any i | nterests.11 U.S.C. § 521(c):                   |                             |
| 25. Trusts            | s, equitable or future inte  | ests in property (other than   | n anything listed in line 1),   | , and rights or powers exer                    | cisable for your benefit    |
|                       | . Give specific information  | about them   |                                 |  |                             |
|                       |  | s, trade secrets, and other<br>es, websites, proceeds from r   |                                 | ements   |                             |
|                       | . Give specific information  | about them   |                                 |  |                             |

|     |                        | Case 16-363  | 354 D                      | oc 1      | Filed 11/15/16<br>Document                           | Entered 11/15/16 12:24:39                              | Desc Main  |
|-----|------------------------|--|----------------------------|-----------|--|--|--|
| D   | ebtor 1                | Rick Nelson  |                            |           | Document   | Page 13 of 52 Case number (if known)                   |  |
| 27. | Exam <sub>i</sub> ■ No | es, franchises, and oles: Building permits,          | , exclusive                | licenses  |  | n holdings, liquor licenses, professional licens       | es   |
| М   | onev or                | property owed to yo                                  | ou?                        |           |  |  | Current value of the   |
|     | ,                      | ,  |                            |           |  |  | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref                | funds owed to you                                    |                            |           |  |  |  |
|     | _                      | Give specific informa                                | tion about                 | them, inc | cluding whether you alre                             | ady filed the returns and the tax years                |  |
| 29. | Exam <sub>i</sub> ■ No | support oles: Past due or lump Give specific informa |                            | ony, spo  | usal support, child suppo                            | ort, maintenance, divorce settlement, property         | settlement   |
| 30. | Exam <sub>p</sub> ■ No | benefits; unpaid                                     | disability in<br>loans you |           |  | efits, sick pay, vacation pay, workers' compe          | nsation, Social Security                                     |
|     | ☐ Yes.                 | Give specific informa                                | ation                      |           |  |  |  |
| 31. | Examµ<br>■ No          |  | , or life ins              |           | nealth savings account (l                            | HSA); credit, homeowner's, or renter's insurar         | nce  |
|     |                        |  | Company                    | / name:   |  | Beneficiary:   | Surrender or refund value:                                   |
| 32. | If you a some o        |  | a living tru               |           | someone who has die<br>et proceeds from a life in:   | ed<br>surance policy, or are currently entitled to rec | eive property because  |
| 33. | Exam <sub>l</sub> ■ No |  | oyment dis                 |           | you have filed a lawsui<br>surance claims, or rights | t or made a demand for payment<br>to sue               |  |
| 34. | ■ No                   | contingent and unlice Describe each claim            |                            | laims of  | every nature, including                              | g counterclaims of the debtor and rights to            | set off claims   |
| 35. | ■ No                   | nancial assets you d                                 |                            | eady list |  |  |  |
| 36  |                        |  | -                          |           | om Part 4, including ar                              | ny entries for pages you have attached                 | \$25.00  |
| Pa  | art 5: De              | scribe Any Business-R                                | Related Prop               | erty You  | Own or Have an Interest I                            | n. List any real estate in Part 1.                     |  |
| 37. | Do you                 | own or have any legal o                              | or equitable               | interest  | in any business-related p                            | roperty?   |  |
|     |                        | to Part 6.   |                            |           |  |  |  |
|     | 🛚 Yes. 🤆               | Go to line 38.                                       |                            |           |  |  |  |

Official Form 106A/B Schedule A/B: Property page 4

Case 16-36354 Doc 1 Filed 11/15/16 Entered 11/15/16 12:24:39 Desc Main Page 14 of 52 Document Case number (if known) Debtor 1 **Rick Nelson** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$16,000.00 57. Part 3: Total personal and household items, line 15 \$1,285.00 Part 4: Total financial assets, line 36 \$25.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61.

\$17,310.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$17,310.00

\$17,310.00

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Page 15 of 52 Document Fill in this information to identify your case: Debtor 1 **Rick Nelson** Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Schedule A/B that lists this property                           | portion you own                     | Amount of the exemption you claim                                 | Specific laws that allow exemption |
|---|-------------------------------------|---|------------------------------------|
|   | Copy the value from<br>Schedule A/B | Check only one box for each exemption.                            |                                    |
| Furniture, Furnishings and Supplies Line from Schedule A/B: 6.1 | \$900.00                            | \$900.00  | 735 ILCS 5/12-1001(b)              |
| Life from Schedule A.B. 3.1                                     |                                     | □ 100% of fair market value, up to any applicable statutory limit |                                    |
| Television, misc electronics Line from Schedule A/B: 7.1        | \$100.00                            | \$100.00  | 735 ILCS 5/12-1001(b)              |
| Line noin Schedule A.B. 111                                     |                                     | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Handgun Line from Schedule A/B: 10.1                            | \$100.00                            | <b>\$100.00</b>   | 735 ILCS 5/12-1001(b)              |
| Enterior constant 772.  |                                     | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Necessary Wearing Apparel Line from Schedule A/B: 11.1          | \$185.00                            | <b>\$185.00</b>   | 735 ILCS 5/12-1001(a)              |
| Line Horr Schedule AVB. 1111                                    |                                     | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking at PNC Bank Line from Schedule A/B: 17.1               | \$25.00                             | \$25.00   | 735 ILCS 5/12-1001(b)              |
| Ellie Holli Golledale A/D. 1111                                 |                                     | ☐ 100% of fair market value, up to any applicable statutory limit |                                    |

Filed 11/15/16 Entered 11/15/16 12:24:39 Document Page 16 of 52 Debtor 1 Rick Nelson Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 16-36354

No

Yes

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|  | Document   | Page 17 of 52                          |                            |                   |
|--|--|--|----------------------------|-------------------|
| Fill in this information to identify yo                            | ur case:   |  |                            |                   |
| Debtor 1 Rick Nelson   |  |  |                            |                   |
| First Name   | Middle Name  | Last Name                              | -                          |                   |
| Debtor 2   |  |  |                            |                   |
| (Spouse if, filing) First Name                                     | Middle Name  | Last Name                              | -                          |                   |
| United States Ponkruptov Court for the                             | NORTHERN DISTRICT OF ILLIA                         | IOIS EASTERNI DIVISIONI                |                            |                   |
| United States Bankruptcy Court for the                             | NORTHERN DISTRICT OF ILLIN                         | IOIS, EASTERN DIVISION                 | -                          |                   |
| Case number  |  |  |                            |                   |
| (if known)   |  |  | ☐ Check                    | if this is an     |
|  |  |  | amend                      | ed filing         |
|  |  |  |                            |                   |
| Official Form 106D   |  |  |                            |                   |
| Schedule D: Creditors  | s Who Have Claims S                                | ecured by Propert                      | :V                         | 12/15             |
|  |  |  | .,                         | ,                 |
| Be as complete and accurate as possible.                           |  |  |                            |                   |
| is needed, copy the Additional Page, fill it<br>number (if known). | out, number the entries, and attach it to          | this form. On the top of any addition  | onal pages, write your nai | ne and case       |
| 1. Do any creditors have claims secured b                          | ov your property?                                  |  |                            |                   |
|  | this form to the court with your other so          | chedules. You have nothing else        | to report on this form     |                   |
| _  | ·  | shedules. Tou have nothing else        | to report on this form.    |                   |
| Yes. Fill in all of the information                                | below.   |  |                            |                   |
| Part 1: List All Secured Claims                                    |  |  |                            |                   |
| 2. List all secured claims. If a creditor has                      | more than one secured claim, list the credit       | cor separately                         | Column B                   | Column C          |
| for each claim. If more than one creditor ha                       | as a particular claim, list the other creditors in | n Part 2. As Amount of claim           | Value of collateral        | Unsecured         |
| much as possible, list the claims in alphabet                      | tical order according to the creditor's name.      | Do not deduct the value of collateral. | that supports this claim   | portion<br>If any |
| 2.1 American Eagle Bank  | Describe the property that secures the             |  | \$16,000.00                | \$17,000.00       |
| Creditor's Name  | 2014 Chevrolet Traverse 2900                       | 0                                      |                            |                   |
|  | miles  |  |                            |                   |
|  | As of the date you file, the claim is: Ch          | and all that                           |                            |                   |
| 556 Randall Rd.  | apply.   | leck all that                          |                            |                   |
| South Elgin, IL 60177  | ☐ Contingent                                       |  |                            |                   |
| Number, Street, City, State & Zip Code                             | ☐ Unliquidated                                     |  |                            |                   |
|  | ☐ Disputed   |  |                            |                   |
| Who owes the debt? Check one.                                      | Nature of lien. Check all that apply.              |  |                            |                   |
| ■ Debtor 1 only  | An agreement you made (such as mo                  | ortgage or secured                     |                            |                   |
| Debtor 2 only  | car loan)  |  |                            |                   |
| ☐ Debtor 1 and Debtor 2 only                                       | ☐ Statutory lien (such as tax lien, mech           | anic's lien)                           |                            |                   |
| ☐ At least one of the debtors and another                          | ☐ Judgment lien from a lawsuit                     |  |                            |                   |
| ☐ Check if this claim relates to a                                 | Other (including a right to offset)                |  |                            |                   |
| community debt   |  |  |                            |                   |
| Date debt was incurred 2014  | Last 4 digits of account numbe                     | r <b>0001</b>                          |                            |                   |
|  |  |  |                            |                   |
| 2.2 Wife's car payment   | Describe the property that secures the             | e claim: \$0.00                        | \$0.00                     | \$0.00            |
| Creditor's Name  | bescribe the property that secures the             | φυ.υυ                                  | φυ.υυ                      | <u> </u>          |
|  |  |  |                            |                   |
|  |  |  |                            |                   |
|  | As of the date you file, the claim is: Ch          | eck all that                           |                            |                   |
|  | apply.  Contingent                                 |  |                            |                   |
| Number, Street, City, State & Zip Code                             | ☐ Unliquidated                                     |  |                            |                   |
|  | ☐ Disputed   |  |                            |                   |
| Who owes the debt? Check one.                                      | Nature of lien. Check all that apply.              |  |                            |                   |
| Debtor 1 only  | ☐ An agreement you made (such as mo                | ortgage or secured                     |                            |                   |
| Debtor 2 only  | car loan)  |  |                            |                   |
| Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mech           | anic's lien)                           |                            |                   |
| ☐ At least one of the debtors and another                          | ☐ Judgment lien from a lawsuit                     | <del></del> ,                          |                            |                   |
| ☐ Check if this claim relates to a                                 | ☐ Other (including a right to offset)              |  |                            |                   |
| community debt   |  |  |                            |                   |
| Data daht was incurred   | Look 4 digits of account                           | _                                      |                            |                   |
| Date debt was incurred   | Last 4 digits of account numbe                     | I                                      |                            |                   |

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| Debtor 1 Rick     | Nelson                               |                                    | Case number (if know) |   |
|-------------------|--------------------------------------|------------------------------------|-----------------------|---|
| First Nar         | ne Middle Name                       | Last Name                          | -                     |   |
| Add the dollar va | alue of your entries in Column A on  | this page. Write that number here: | \$33,000.00           | 0 |
|                   | page of your form, add the dollar va | . •                                | \$33,000.00           |   |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|--|--|---|---|-----------------------------|--------------------------|
| Fill in this in                                    | formation to identify your   |   | 1 4440 10 01 02   |                             |                          |
| Debtor 1   | Rick Nelson  |   |   |                             |                          |
| Dobtor 1   | First Name   | Middle Name   | Last Name   |                             |                          |
| Debtor 2   |  |   |   |                             |                          |
| (Spouse if, filing)                                | First Name   | Middle Name   | Last Name   |                             |                          |
| United States                                      | Bankruptcy Court for the:  | NORTHERN DISTRICT C   | OF ILLINOIS, EASTERN DIVISION   |                             |                          |
| Case number  | r  |   |   |                             |                          |
| (if known)   |  |   |   | _ c                         | heck if this is an       |
|  |  |   |   | a                           | mended filing            |
| Official Fo  | orm 106E/F   |   |   |                             |                          |
|  | E/F: Creditors W   | ho Have Unsecur   | ed Claims   |                             | 12/15                    |
|  |  |   | IORITY claims and Part 2 for creditors  | with NONDRIORITY clair      |                          |
| Schedule D: Cr<br>eft. Attach the<br>name and case | editors Who Have Claims Sec<br>Continuation Page to this pag<br>number (if known). | ured by Property. If more spare. If you have no information | 6G). Do not include any creditors with<br>ce is needed, copy the Part you need,<br>to report in a Part, do not file that Part         | fill it out, number the ent | ries in the boxes on the |
|  | st All of Your PRIORITY Un   |   |   |                             |                          |
|  | editors have priority unsecure   | d claims against you?                                       |   |                             |                          |
| No. Go   | to Part 2.   |   |   |                             |                          |
| ☐ Yes.   |  |   |   |                             |                          |
| Part 2:  | st All of Your NONPRIORIT  | Y Unsecured Claims  |   |                             |                          |
| 3. Do any cr                                       | editors have nonpriority unsec   | ured claims against you?                                    |   |                             |                          |
| ☐ No. Yo   | u have nothing to report in this pa  | art. Submit this form to the cour                           | t with your other schedules.  |                             |                          |
| Yes.   |  |   |   |                             |                          |
| unsecured  | claim, list the creditor separately  | for each claim. For each claim                              | r of the creditor who holds each claim.<br>listed, identify what type of claim it is. Do<br>f you have more than three nonpriority un | not list claims already inc | luded in Part 1. If more |
|  |  |   |   |                             | Total claim              |
| 4.1 Ame  | rican Eagle Bank   | Last 4 digits of  | of account number 0001  |                             | \$33,000.00              |
|  | iority Creditor's Name   |   |   | -                           |                          |
|  | Randall Rd.<br>th Elgin, II. 60177   | when was the  | e debt incurred?  |                             | -                        |
|  | er Street City State Zlp Code  | As of the date  | you file, the claim is: Check all that ap   | ply                         |                          |
| Who  | incurred the debt? Check one.  |   |   |                             |                          |
| ■ De   | ebtor 1 only   | ☐ Contingent  |   |                             |                          |
| □ De   | ebtor 2 only   | ☐ Unliquidate   | d   |                             |                          |
| □ De   | ebtor 1 and Debtor 2 only  | ☐ Disputed  |   |                             |                          |
| ☐ At   | least one of the debtors and and   | other Type of NONP  | PRIORITY unsecured claim:   |                             |                          |
|  | neck if this claim is for a comr   | _   |   |                             |                          |
| debt<br>Is the                                     | claim subject to offset?   | ☐ Obligations report as priori                              | arising out of a separation agreement or  | r divorce that you did not  |                          |
| ■ No   | •  |   | ension or profit-sharing plans, and other s   | similar debts               |                          |
| <b>—</b> No  |  | •   |   |                             |                          |
| ⊔ Ye   | :5   | Other. Spec   | City JAN LUAN   |                             |                          |

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Debtor 1 Rick Nelson Case number (if know) 4.2 **BEST BUY/CBNA** Last 4 digits of account number 3692 \$960.00 Nonpriority Creditor's Name PO BOX 6497 When was the debt incurred? Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.3 **CAPITAL ONE BANK USA** Last 4 digits of account number 0152 \$2,150.00 Nonpriority Creditor's Name PO BOX 30281 When was the debt incurred? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts  $\Pi$  Yes **CREDIT CARD PURCHASES** Other. Specify 4.4 CAPITAL ONE BANK USA Last 4 digits of account number 9428 \$1,620.00 Nonpriority Creditor's Name PO BOX 30281 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes

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Debtor 1 Rick Nelson Case number (if know) 4.5 **CAPITAL ONE/ MENARDS** Last 4 digits of account number 1482 \$195.00 Nonpriority Creditor's Name PO BOX 30253 When was the debt incurred? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.6 **COMMERCE BANK** Last 4 digits of account number 6163 \$1,000.00 Nonpriority Creditor's Name PO BOX 411036 When was the debt incurred? Kansas City, MO 64141 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts  $\Pi$  Yes **CREDIT CARD PURCHASES** Other. Specify 4.7 COMMERCE BANK Last 4 digits of account number 7915 \$1,050.00 Nonpriority Creditor's Name PO BOX 411036 When was the debt incurred? Kansas City, MO 64141 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim:  $\square$  At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES

☐ Yes

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Debtor 1 Rick Nelson Case number (if know) 4.8 **CREDIT ONE BANK** Last 4 digits of account number 5183 \$665.00 Nonpriority Creditor's Name PO BOX 98872 When was the debt incurred? Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.9 **DISCOVER FINANCIAL SERVICES** Last 4 digits of account number 3978 \$425.00 Nonpriority Creditor's Name PO BOX 15316 When was the debt incurred? WILMINGTON, DE. 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 Exxon Mobile/Citibank \$475.00 2533 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 6497 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes

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Debtor 1 Rick Nelson Case number (if know) 4.1 **Kay Jewelers** 7160 \$577.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 3680 When was the debt incurred? Akron, OH 44309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 **MERRICK BANK** 3596 \$1,400.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **PO BOX 1500** When was the debt incurred? Draper, UT 84020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 **MERRICK BANK** 3842 \$900.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **PO BOX 1500** When was the debt incurred? Draper, UT 84020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes

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Debtor 1 Rick Nelson Case number (if know) 4.1 SHELL/CITIBANK CBNA 8001 \$435.00 Last 4 digits of account number 4 Nonpriority Creditor's Name PO BOX 6497 When was the debt incurred? Sioux Falls, SD 57117 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 SYNC/TORO CONSUMER 9459 \$2,500.00 Last 4 digits of account number 5 Nonpriority Creditor's Name PO BOX 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 SYNCB/CARE CREDIT 4731 \$110.00 Last 4 digits of account number 6 Nonpriority Creditor's Name C/O P O BOX 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Document Page 25 of 52 Debtor 1 Rick Nelson Case number (if know) 4.1 SYNCB/HH GREGG 6246 \$2,050.00 Last 4 digits of account number Nonpriority Creditor's Name C/O P O BOX 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.1 SYNCB/LA-Z-BOY FURNITURE 6568 \$1,010.00 Last 4 digits of account number 8 Nonpriority Creditor's Name PO BOX 965036 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes SYNCB/PAYPAL EXTRAS 4.1 5325 \$2,250.00 **MASTERCARD** Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

deht

■ No

☐ Yes

☐ Student loans

report as priority claims

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify CREDIT CARD PURCHASES

☐ Check if this claim is for a community

Is the claim subject to offset?

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Debtor 1 Rick Nelson Case number (if know) 4.2 SYNCB/SAMS CLUB 4115 \$96.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO BOX 965005 When was the debt incurred? Orlando, FL 32896 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.2 SYNCB/WAMART CREDIT CARD 0710 \$1,002.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 965024 When was the debt incurred? Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes 4.2 TD Bank USA/Target Credit \$975.00 4167 Last 4 digits of account number 2 Nonpriority Creditor's Name **PO BOX 673** When was the debt incurred? Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify CREDIT CARD PURCHASES ☐ Yes

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| WORLDS FOREMOST<br>BANK/CABELAS VISA     | Last 4 digits of account number 7859  | \$4,000.00 |
|--|---|------------|
| Nonpriority Creditor's Name              | <del></del>   |            |
| 4800 NW 1ST ST.                          | When was the debt incurred?   |            |
| STE 300                                  |   |            |
| Lincoln, NE 68521                        | _   |            |
| Number Street City State Zlp Code        | As of the date you file, the claim is: Check all that apply                     |            |
| Who incurred the debt? Check one.        |   |            |
| Debtor 1 only                            | ☐ Contingent  |            |
| Debtor 2 only                            | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only               | ☐ Disputed  |            |
| At least one of the debtors and another  | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community | ☐ Student loans   |            |
| debt                                     | ☐ Obligations arising out of a separation agreement or divorce that you did not |            |
| Is the claim subject to offset?          | report as priority claims   |            |
| No                                       | lacksquare Debts to pension or profit-sharing plans, and other similar debts    |            |
| ☐ Yes                                    | ■ Other. Specify CREDIT CARD PURCHASES  |            |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     |             | Total Claim |
|--------------|-----|---|-----|-------------|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$          | 0.00        |
| Total claims |     |   |     | <del></del> |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$          | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$          | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$          | 0.00        |
|              |     |   |     |             | Total Claim |
|              | 6f. | Student loans   | 6f. | \$          | 0.00        |
| Total claims |     |   |     |             |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$          | 58,845.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$          | 58,845.00   |

Fill in this information to identify your case: Debtor 1 **Rick Nelson** Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the<br>, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|--|-------------------|---|
| 2.1 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          | _                                       |
| 2.2 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   |   |
|     | City      |                              | State  | ZIP Code          | _                                       |
| 2.3 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.4 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
| 2.5 |           |                              |  |                   |   |
|     | Name      |                              |  |                   | _                                       |
|     | Number    | Street                       |  |                   | _                                       |
|     | City      |                              | State  | ZIP Code          |   |
|     |           |                              |  |                   |   |

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|-------------------|---|-------------------------------|---------------------------|--|
| Fill in this      | information to identify your  | case:                         |                           |  |
| Dobtor 1          | Diala Mala an   |                               |                           |  |
| Debtor 1          | Rick Nelson First Name  | Middle Name                   | Last Name                 |  |
| Debtor 2          | r not reame   | Widdle Hame                   | Lastitatio                |  |
| (Spouse if, filin | ng) First Name  | Middle Name                   | Last Name                 |  |
|                   |   |                               |                           |  |
| United Stat       | tes Bankruptcy Court for the:   | NORTHERN DISTRICT             | OF ILLINOIS, EASTER       | N DIVISION   |
| O                 |   |                               |                           |  |
| Case numb         | per   |                               |                           | ☐ Check if this is an  |
| (                 |   |                               |                           | amended filing   |
|                   |   |                               |                           | amended hing   |
| Official          | Form 106H   |                               |                           |  |
|                   |   |                               |                           |  |
| Sched             | ule H: Your Cod   | ebtors                        |                           | 12/15  |
|                   |   |                               |                           |  |
|                   |   |                               |                           | s complete and accurate as possible. If two married  |
|                   |   |                               |                           | ion. If more space is needed, copy the Additional Page<br>o this page. On the top of any Additional Pages, write |
|                   | and case number (if known)  |                               |                           | o this page. On the top of any Additional Pages, write   |
| our nume          | and dase namber (ii known)  | , Anoner every question       | •                         |  |
| 1. Do y           | you have any codebtors? (If   | you are filing a joint case,  | do not list either spouse | as a codebtor.   |
|                   |   |                               |                           |  |
| ■ No              |   |                               |                           |  |
| ☐ Yes             |   |                               |                           |  |
|                   |   |                               |                           |  |
|                   | า <b>in the last 8 years, have yoเ</b><br>a, California, Idaho, Louisiana |                               |                           | y? (Community property states and territories include  |
| Alizona           | a, California, Idano, Louisiana   | , inevada, inew iviexico, Pu  | erio Rico, Texas, Washi   | ngion, and wisconsin.)   |
| ■ No              | Go to line 3.   |                               |                           |  |
|                   | . Did your spouse, former spo   | uso or logal aquivalent live  | with you at the time?     |  |
| L res             | . Dia your spouse, former spo   | use, or legal equivalent live | e with you at the time?   |  |
|                   |   |                               |                           |  |
| 3. In Colu        | umn 1, list all of your codebt  | tors. Do not include your     | spouse as a codebtor      | if your spouse is filing with you. List the person show  |
|                   |   |                               |                           | sure you have listed the creditor on Schedule D (Offici  |
|                   | 106D), Schedule E/F (Officia<br>olumn 2.                                  | I Form 106E/F), or Sched      | ule G (Official Form 10   | 6G). Use Schedule D, Schedule E/F, or Schedule G to  |
| out Co            | Juliii 2.   |                               |                           |  |
| (                 | Column 1: Your codebtor   |                               |                           | Column 2: The creditor to whom you owe the debt  |
| N                 | Name, Number, Street, City, State and Z                                   | IP Code                       |                           | Check all schedules that apply:  |
|                   |   |                               |                           | _  |
| 3.1               |   |                               |                           | Schedule D, line   |
| Г                 | Name  |                               |                           | ☐ Schedule E/F, line   |
|                   |   |                               |                           | ☐ Schedule G, line   |
| -                 | Number Street   |                               |                           | _  |
|                   | City  | State                         | ZIP Code                  |  |
|                   |   |                               |                           |  |
|                   |   |                               |                           |  |
| 3.2               |   |                               |                           | Schedule D, line   |
| 1                 | Name  |                               |                           | ☐ Schedule E/F, line   |
|                   |   |                               |                           | ☐ Schedule G, line   |
| -                 | Number Street   |                               |                           | _  |
|                   | City  | State                         | ZIP Code                  |  |
|                   |   |                               |                           |  |

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|                   | in this information to ide  |                             | ise:  |                                   |             |        |            |             |              |                                  |          |
|-------------------|---|-----------------------------|---|-----------------------------------|-------------|--------|------------|-------------|--------------|----------------------------------|----------|
| De                | btor 1 Ri   | ck Nelson                   |   |                                   |             | _      |            |             |              |                                  |          |
|                   | btor 2  |                             |   |                                   |             |        |            |             |              |                                  |          |
| Uni               | ited States Bankruptcy  | Court for the:              | NORTHERN DISTRIC  | CT OF ILLINOIS, EAS               | STERN       |        |            |             |              |                                  |          |
| Ca                | se number   |                             |   |                                   |             |        | Check      | if this is: |              |                                  |          |
| (If kı            | nown)   |                             |   | -                                 |             |        | ☐ An       | n amende    | ed filing    |                                  |          |
|                   |   |                             |   |                                   |             |        |            |             |              | g postpetition<br>ollowing date: | chapter  |
|                   | fficial Form 10   |                             |   |                                   |             |        | M          | M / DD/ Y   | YYY          |                                  |          |
| S                 | chedule I: Yo   | our Inco                    | ome   |                                   |             |        |            |             |              |                                  | 12/15    |
| spo<br>atta<br>Pa | use. If you are separach a separate sheet to                        | ted and you<br>this form. ( | are married and not filir<br>r spouse is not filing w<br>On the top of any additi | ith you, do not inclu             | ide infori  | matic  | n about    | your spo    | ouse. If mo  | ore space is                     | needed,  |
| 1.                | Fill in your employm<br>information.                                | ent                         |   | Debtor 1                          |             |        |            | Debtor 2    | or non-fi    | ling spouse                      |          |
|                   | If you have more than   |                             | Employment status   | ■ Employed                        |             |        |            | ☐ Emplo     | oyed         |                                  |          |
|                   | attach a separate page with information about additional employers. | ,                           | _mproyment etatae   | ☐ Not employed                    |             |        |            | ■ Not e     | mployed      |                                  |          |
|                   |   |                             | Occupation  |                                   |             |        |            |             |              |                                  |          |
|                   | Include part-time, sea self-employed work.                          | isonai, or                  | Employer's name   | Village of Sleep                  | y Hollo     | w      |            |             |              |                                  |          |
|                   | Occupation may inclu<br>or homemaker, if it ap                      |                             | Employer's address  | 1 Thoroughbree<br>Dundee, IL 6011 |             |        |            |             |              |                                  |          |
|                   |   |                             | How long employed t   | here?                             |             |        |            | _           |              |                                  |          |
| Pa                | rt 2: Give Details  | About Mon                   | thly Income   |                                   |             |        |            |             |              |                                  |          |
|                   | imate monthly income<br>use unless you are sepa                     |                             | te you file this form. If   | you have nothing to r             | eport for   | any li | ine, write | \$0 in the  | space. Inc   | clude your no                    | n-filing |
|                   | ou or your non-filing spo<br>e space, attach a separ                |                             | re than one employer, co  | ombine the informatio             | n for all e | emplo  | yers for t | hat perso   | on on the li | nes below. If                    | you need |
|                   |   |                             |   |                                   |             |        | For Deb    | tor 1       |              | btor 2 or<br>ing spouse          |          |
| 2.                |   |                             | ry, and commissions (be calculate what the monthle                                |                                   | 2.          | \$     | 2,8        | 888.32      | \$           | 0.00                             |          |
| 3.                | Estimate and list mo  | onthly overti               | me pay.   |                                   | 3.          | +\$    |            | 215.60      | +\$          | 0.00                             |          |
| 4.                | Calculate gross Inco  | ome. Add lin                | e 2 + line 3.   |                                   | 4.          | \$     | 3.10       | 3.92        | \$           | 0.00                             |          |

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| Deb | tor 1              | Rick Nelson   | -         | С               | Case number (if ki | nown)        |               |                               |                  |
|-----|--------------------|---|-----------|-----------------|--------------------|--------------|---------------|-------------------------------|------------------|
|     | Car                | ur line 4 have  | 4         |                 | For Debtor 1       | 2.02         | non-          | Debtor 2 or<br>-filing spouse |                  |
|     | Col                | by line 4 here  | 4.        |                 | \$ 3,103           | 3.92         | \$            | 0.00                          | _                |
| 5.  | List               | all payroll deductions:   |           |                 |                    |              |               |                               |                  |
|     | 5a.                | Tax, Medicare, and Social Security deductions   | 5a        |                 |                    | 5.41         | \$            | 0.00                          | _                |
|     | 5b.                | Mandatory contributions for retirement plans  | 5b        |                 |                    | 0.00         | \$            | 0.00                          | _                |
|     | 5c.                | Voluntary contributions for retirement plans  | 5c        |                 |                    | 0.00         | \$            | 0.00                          | _                |
|     | 5d.                | Required repayments of retirement fund loans Insurance  | 5d        |                 | . —                | 0.00         | \$            | 0.00                          | _                |
|     | 5e.<br>5f.         |   | 5e<br>5f. |                 |                    | 0.00         | \$            | 0.00                          | _                |
|     | 5ı.<br>5g.         | Domestic support obligations Union dues   | 5ı.<br>5g |                 | · —                | ).00<br>).58 | \$            | 0.00                          | _                |
|     | 5y.<br>5h.         | Other deductions. Specify: AFLCPRE  | -         | ,               | ·                  | 2.65         |               | 0.00                          | _                |
| 6.  |                    | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | _ 6.      |                 | ·                  | 3.64         | \$<br>        | 0.00                          | -                |
|     |                    |   |           |                 |                    |              | · · —         |                               | _                |
| 7.  |                    | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.        | •               | \$ 2,39            | 0.28         | \$            | 0.00                          | _                |
| 8.  | List<br>8a.        | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a        | 1.              | \$                 | 0.00         | \$            | 0.00                          |                  |
|     | 8b.                | Interest and dividends  | 8b        |                 | ·                  | 0.00         | \$            | 0.00                          | _                |
|     | 8c.                | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  |           |                 |                    | 0.00         | \$            | 0.00                          | _                |
|     | 8d.                | Unemployment compensation   | 8d        |                 | ·                  | 0.00         | \$            | 0.00                          | _                |
|     | 8e.                | Social Security   | 8e        |                 | ·                  | 0.00         | \$            | 0.00                          | _                |
|     | 8f.                | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | 8f.       |                 |                    | 0.00         | \$            | 0.00                          | _                |
|     | 8g.<br>8h.         | Pension or retirement income Other monthly income. Specify:   | 8g        | ,               |                    | 0.00         | , <u>\$</u> _ | 3,098.00<br>0.00              | _                |
|     | OII.               | Other monthly income. Specily:  | _ 011     | ı. <del>.</del> | Ψ                  |              | ΤΨ            | 0.00                          | _                |
| 9.  | Add                | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.        | \$              |                    | 0.00         | \$            | 3,098.0                       | 0                |
| 10. | Cal                | culate monthly income. Add line 7 + line 9.   | 10.       | \$              | 2,395.28           | + \$         | 3.0           | 98.00 = \$                    | 5,493.28         |
|     |                    | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  |           | -               | _,,,,,,            | * -          |               | <u> </u>                      | 0,100120         |
| 11. | Incl<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:        | depe      |                 |                    |              | •             | chedule J.                    | 0.00             |
| 12. |                    | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certainlies   |           |                 |                    |              |               | 12. \$                        | 5,493.28         |
| 10  | D-                 | you expect an increase or degrees within the year after you file this form  | 2         |                 |                    |              |               | Combi<br>monthl               | ned<br>ly income |
| 13. | <b>-</b>           | you expect an increase or decrease within the year after you file this form No.   | r         |                 |                    |              |               |                               |                  |
|     | _                  | Yes. Explain:   |           |                 |                    |              |               |                               |                  |

Official Form 106I Schedule I: Your Income page 2

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| EIII I | n this informa                                | ation to identify yo                 | nr case.                            |   |  | 1                    |                                   |                               |
|--------|---|--------------------------------------|-------------------------------------|---|--|----------------------|-----------------------------------|-------------------------------|
| Debt   |   |                                      | ur casc.                            |   |  | Cha                  | als if this is:                   |                               |
| Debt   | .01 1   | Rick Nelson                          |                                     |   |  | Che                  | ck if this is:  An amended filing |                               |
| Debt   |   | -                                    |                                     |   |  |                      |                                   | wing postpetition chapter     |
| (Spo   | use, if filing)                               |                                      |                                     |   |  |                      | 13 expenses as of                 | the following date:           |
| Unite  | ed States Bankı                               | ruptcy Court for the:                |                                     | IERN DISTRICT OF ILLIN<br>RN DIVISION                                     | OIS,                                   |                      | MM / DD / YYYY                    |                               |
|        | e number<br>nown)                             |                                      |                                     |   |  |                      |                                   |                               |
| Of     | ficial Fo                                     | orm 106J                             |                                     |   |  | 1                    |                                   |                               |
| Sc     | hedule  | J: Your E                            | Exper                               | ises  |  |                      |                                   | 12/1                          |
| Be a   | as complete<br>rmation. If m<br>nber (if know | and accurate as                      | possible<br>eded, atta<br>y questio | . If two married people ar  |  |                      |                                   |                               |
| 1.     | Is this a joir                                |                                      | iloiu                               |   |  |                      |                                   |                               |
|        | ■ No. Go to                                   | o line 2.<br>es Debtor 2 live in     | n a separ                           | ate household?  |  |                      |                                   |                               |
|        | □ N<br>□ Y                                    |                                      | t file Offici                       | al Form 106J-2, <i>Expense</i> s  | for Separate House                     | e <i>hold</i> of Del | otor 2.                           |                               |
| •      | Da wan haw                                    | - dd4-0                              | <b>=</b>                            |   |  |                      |                                   |                               |
| 2.     | •   | e dependents?                        | ■ No                                | E11   | Barrie Iradia ala                      |                      | Secretarily                       | Secretary law                 |
|        | Do not list D<br>Debtor 2.                    | ebtor 1 and                          | ☐ Yes.                              | Fill out this information for each dependent                              | Dependent's relat<br>Debtor 1 or Debto |                      | Dependent's age                   | Does dependent live with you? |
|        | Do not state                                  | the                                  |                                     |   |  |                      |                                   | □ No                          |
|        | dependents                                    | names.                               |                                     |   |  |                      | _                                 | ☐ Yes                         |
|        |   |                                      |                                     |   |  |                      |                                   | □ No                          |
|        |   |                                      |                                     |   |  |                      |                                   | ☐ Yes<br>☐ No                 |
|        |   |                                      |                                     |   |  |                      |                                   | ☐ Yes                         |
|        |   |                                      |                                     |   |  |                      |                                   | □ No                          |
|        |   |                                      |                                     |   |  |                      |                                   | ☐ Yes                         |
| 3.     |   | oenses include                       |                                     | No  |  |                      |                                   |                               |
|        |   | f people other th<br>d your depender |                                     | Yes   |  |                      |                                   |                               |
| Dow    | O. Fatim                                      |                                      | M                                   | h. F  |  |                      |                                   |                               |
| exp    | mate your ex                                  |                                      | ur bankr                            | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |  |                      |                                   |                               |
| the    |   | h assistance and                     |                                     | government assistance i<br>luded it on <i>Schedule I:</i> Y               |  |                      | Your exp                          | enses                         |
| (011   | iciai i oi iii i c                            | , oi.,                               |                                     |   |  |                      |                                   |                               |
| 4.     |   | or home ownershind any rent for the  |                                     | ses for your residence. In lot.   | nclude first mortgag                   | e<br>4.              | \$                                | 645.63                        |
|        | If not includ                                 | ded in line 4:                       |                                     |   |  |                      |                                   |                               |
|        | 4a. Real e                                    | estate taxes                         |                                     |   |  | 4a.                  | \$                                | 625.00                        |
|        |   | erty, homeowner's                    | , or renter                         | 's insurance  |  | 4b.                  | *                                 | 0.00                          |
|        |   | maintenance, rep                     |                                     |   |  | 4c.                  | :                                 | 100.00                        |
| _      |   | owner's associati                    |                                     |   |  | 4d.                  | ·                                 | 0.00                          |
| 5.     | Additional r                                  | mortgage payme                       | ents for yo                         | our residence, such as ho   | me equity loans                        | 5.                   | <b>Þ</b>                          | 0.00                          |

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| Deb         | tor 1  | Rick Nel      | son   | Case nu                                   | mb   | per (if known)  |                              |
|-------------|--------|---------------|---|---|------|-----------------|------------------------------|
| 6.          | Utilit | ies:          |   |   |      |                 |                              |
| -           | 6a.    | Electricity,  | heat, natural gas   | 6a  | a.   | \$              | 270.00                       |
|             | 6b.    | Water, sev    | wer, garbage collection   | 6b  | ٥.   | \$              | 65.00                        |
|             | 6c.    | Telephone     | e, cell phone, Internet, satellite, and cable services  | 60  | Э.   | \$              | 169.00                       |
|             | 6d.    | Other. Spe    | ecify: cable internet   | 60  | d.   | \$              | 165.00                       |
| 7.          | Food   | •             | ekeeping supplies   |   | 7.   | \$              | 650.00                       |
| 8.          |        |               | children's education costs  | 3   | 3.   | \$              | 0.00                         |
| 9.          |        |               | ry, and dry cleaning  |   | 9.   | \$              | 125.00                       |
| 10.         |        |               | products and services   | 10  | ).   | \$              | 50.00                        |
| 11.         |        |               | ntal expenses   |   | 1.   | ·               | 1,125.00                     |
|             |        |               | Include gas, maintenance, bus or train fare.  |   | -    | <u> </u>        |                              |
|             |        |               | ar payments.  | 12  | 2.   | \$              | 250.00                       |
| 13.         | Ente   | rtainment,    | clubs, recreation, newspapers, magazines, and   | d books 13                                | 3.   | \$              | 75.00                        |
| 14.         | Char   | itable cont   | ributions and religious donations   | 14  | 1.   | \$              | 0.00                         |
|             |        | rance.        | -   |   |      |                 |                              |
|             | Do no  | ot include in | surance deducted from your pay or included in lin   | es 4 or 20.                               |      |                 |                              |
|             | 15a.   | Life insura   | ince  | 15a                                       | а.   | \$              | 0.00                         |
|             | 15b.   | Health ins    | urance  | 15b                                       | ٥.   | \$              | 814.77                       |
|             | 15c.   | Vehicle in    | surance   | 150                                       | Э.   | \$              | 50.00                        |
|             | 15d.   | Other insu    | rance. Specify:   | 150                                       | d.   | \$              | 0.00                         |
| 16.         | Taxe   | s. Do not in  | clude taxes deducted from your pay or included in   | lines 4 or 20.                            |      |                 |                              |
|             | Spec   |               |   | 16  | 3.   | \$              | 0.00                         |
| 17.         |        |               | ease payments:  |   |      | _               |                              |
|             |        |               | ents for Vehicle 1  | 17a                                       |      | *               | 285.00                       |
|             |        |               | ents for Vehicle 2  | 17b                                       |      | ·               | 0.00                         |
|             |        | Other. Spe    | -   | 170                                       | Э.   | \$              | 0.00                         |
|             |        | Other. Spe    |   | 170                                       | d.   | \$              | 0.00                         |
| 18.         |        |               | of alimony, maintenance, and support that you   |   |      | Φ.              | 0.00                         |
| 40          |        |               | your pay on line 5, Schedule I, Your Income (O  |   | 5.   | \$              |                              |
| 19.         |        |               | s you make to support others who do not live v  | -   |      | \$              | 0.00                         |
| 20          | Spec   | ·             | anto anno anno anno fara barbarbarbarbarbarbarbarbarbarbarbarbarb   | 19  |      |                 |                              |
| 20.         |        |               | erty expenses not included in lines 4 or 5 of the son other property  | is form or on <i>Schedule I: 1</i><br>20a |      |                 | 0.00                         |
|             |        |               |   |   |      | ·               | 0.00                         |
|             |        | Real estat    |   | 20b                                       |      |                 | 0.00                         |
|             |        |               | homeowner's, or renter's insurance  | 200                                       |      |                 | 0.00                         |
|             |        |               | nce, repair, and upkeep expenses  | 200                                       |      |                 | 0.00                         |
|             |        |               | er's association or condominium dues  | 206                                       |      | · -             | 0.00                         |
| 21.         | Othe   | r: Specify:   |   | 21  | ۱.   | +\$             | 0.00                         |
| 22.         | Calc   | ulate vour i  | monthly expenses  |   |      |                 |                              |
|             |        |               | through 21.   |   |      | \$              | 5,464.40                     |
|             |        |               | 2 (monthly expenses for Debtor 2), if any, from Of  | ficial Form 106J-2                        |      | \$              |                              |
|             |        |               | a and 22b. The result is your monthly expenses.   |   |      | \$              | 5,464.40                     |
|             | 226. / | Auu IIIIe 226 | a and 22b. The result is your monthly expenses.   |   |      | Ψ               | 5,464.40                     |
| 23.         | Calc   | ulate your i  | monthly net income.   |   |      |                 |                              |
|             | 23a.   | Copy line     | 12 (your combined monthly income) from Schedul  | e I. 23a                                  | а.   | \$              | 5,493.28                     |
|             | 23b.   | Copy your     | monthly expenses from line 22c above.   | 23b                                       | ٥.   | -\$             | 5,464.40                     |
|             |        |               |   |   | ٢    | -               |                              |
|             | 23c.   |               | our monthly expenses from your monthly income.  |   |      | Φ.              | 20.00                        |
|             |        | The result    | is your monthly net income.   | 230                                       | ၁. ု | \$              | 28.88                        |
| 0.4         | D      |               |   | in the comment of the first               |      | f0              |                              |
| <b>24</b> . |        |               | an increase or decrease in your expenses with but expect to finish paying for your car loan within the year |   |      |                 | se or decrease because of a  |
|             |        |               | terms of your mortgage?   | or do you expect your mortgage            | υp   | ayment to morea | SO OF GEOLEGISE DECAUSE OF A |
|             | ■ No   |               | y   |   |      |                 |                              |
|             |        |               | Explain here:   |   |      |                 |                              |
|             | ☐ Ye   | es.           | Explain here:   |   |      |                 |                              |

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| Fill in this infor                                     | mation to identify your                            | case:                    |                             |  |  |
|--|--|--------------------------|-----------------------------|--|--|
| Debtor 1   | Rick Nelson  |                          |                             |  |  |
|  | First Name   | Middle Name              | Last Name                   |  |  |
| Debtor 2<br>(Spouse if, filing)                        | First Name   | Middle Name              | Last Name                   |  |  |
|  |  |                          |                             |  |  |
| United States Ba                                       | ankruptcy Court for the:                           | NORTHERN DISTRICT        | OF ILLINOIS, EASTERN        | DIVISION                               |  |
| Case number  |  |                          |                             |  |  |
| (if known)   |  |                          |                             |  | Check if this is an amended filing                                       |
| If two married p<br>You must file th<br>obtaining mone | eople are filing togethe                           | n connection with a bank | nsible for supplying corr   | ect information.  Making a false state | ement, concealing property, or 0, or imprisonment for up to 20           |
| Sig  | ın Below   |                          |                             |  |  |
| Did you pa   | ay or agree to pay some                            | one who is NOT an attor  | ney to help you fill out ba | ankruptcy forms?                       |  |
| ■ No   |  |                          |                             |  |  |
| ☐ Yes.   | Name of person                                     |                          |                             |  | cruptcy Petition Preparer's Notice,<br>and Signature (Official Form 119) |
|  | alty of perjury, I declare<br>re true and correct. | that I have read the sum | mary and schedules filed    | d with this declaratio                 | on and   |
| X /s/ Ric  | k Nelson   |                          | X                           |  |  |
| Rick N   |  |                          | Signature of I              | Debtor 2                               |  |
| Date   | November 14, 2016                                  |                          | Date                        |  |  |

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| Fill in         | this inform              | ation to identify you   | r case:                                    |   |   |                                    |  |  |  |  |
|-----------------|--------------------------|---|--|---|---|------------------------------------|--|--|--|--|
| Debto           | or 1                     | Rick Nelson   |  |   |   |                                    |  |  |  |  |
| 5               |                          | First Name  | Middle Name                                | Last Name   |   |                                    |  |  |  |  |
| Debto<br>(Spous | or 2<br>e if, filing)    | First Name  | Middle Name                                | Last Name   |   |                                    |  |  |  |  |
| Unite           | d States Bar             | nkruptcy Court for the:   | NORTHERN DISTRICT (                        | OF ILLINOIS, EASTERN DIV  | ISION   |                                    |  |  |  |  |
| 0               |                          |   |  |   |   |                                    |  |  |  |  |
| (if know        | number<br><sub>/n)</sub> |   |  |   |   | theck if this is an mended filing  |  |  |  |  |
|                 |                          |   |  |   |   |                                    |  |  |  |  |
|                 | cial For                 |   |  |   | _   |                                    |  |  |  |  |
| Stat            | tement                   | of Financial  | Affairs for Individ                        | duals Filing for B  | ankruptcy   | 4/10                               |  |  |  |  |
| inform          | nation. If me            |   | attach a separate sheet to                 |   | equally responsible for sup<br>additional pages, write you  |                                    |  |  |  |  |
| Part 1          |                          | ,   | rital Status and Where You                 | ı Lived Before  |   |                                    |  |  |  |  |
| 1. V            | Vhat is your             | current marital statu   | ıs?  |   |   |                                    |  |  |  |  |
|                 | ■ Married □ Not marr     | ried  |  |   |   |                                    |  |  |  |  |
| 2. D            | ouring the la            | he last 3 years, have you lived anywhere other than where you live now? |  |   |   |                                    |  |  |  |  |
|                 | _                        | iot o youro, navo you   | nroa any mnoro outor atan                  | mioro you into nom .  |   |                                    |  |  |  |  |
|                 | ■ No<br>□ Yes. List      | all of the places you l   | ived in the last 3 years. Do n             | ot include where you live now   | ·.  |                                    |  |  |  |  |
| I               | Debtor 1 Pri             | or Address:   | Dates Debtor 1 lived there                 | Debtor 2 Prior Ad   | dress:  | Dates Debtor 2<br>lived there      |  |  |  |  |
|                 |                          |   |  |   | ity property state or territory co, Texas, Washington and W |                                    |  |  |  |  |
|                 | No                       |   |  |   |   |                                    |  |  |  |  |
|                 | _                        | ke sure you fill out <i>Sci</i>   | nedule H: Your Codebtors (O                | fficial Form 106H).   |   |                                    |  |  |  |  |
| Part 2          | 2 Explain                | n the Sources of You  | r Income                                   |   |   |                                    |  |  |  |  |
| F               | ill in the tota          | I amount of income yo   | u received from all jobs and               | ng a business during this yeall businesses, including parter together, list it only once ur |   | ndar years?                        |  |  |  |  |
|                 | ] No                     |   |  |   |   |                                    |  |  |  |  |
|                 | Yes. Fill                | in the details.   |  |   |   |                                    |  |  |  |  |
|                 |                          |   | Debtor 1                                   |   | Debtor 2  |                                    |  |  |  |  |
|                 |                          |   | Sources of income<br>Check all that apply. | Gross income (before deductions and   | Sources of income<br>Check all that apply.                  | Gross income<br>(before deductions |  |  |  |  |
| <b>-</b>        | lam                      | -f  | _  | exclusions)   |   | and exclusions)                    |  |  |  |  |
|                 |                          | of current year until<br>d for bankruptcy:                              | ■ Wages, commissions, bonuses, tips        | \$32,921.02   | ☐ Wages, commissions, bonuses, tips                         |                                    |  |  |  |  |
|                 |                          |   | ☐ Operating a business                     |   | ☐ Operating a business                                      |                                    |  |  |  |  |

Official Form 107

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Page 36 of 52 Document **Rick Nelson** Case number (if known) Debtor 1 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$34,774.91 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$36,184.62 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address                                     | Dates of payment                           | Total amount paid | Amount you still owe | Was this payment for  |
|---|--|-------------------|----------------------|---|
| American Eagle Bank<br>556 Randall Rd.<br>South Elgin, IL 60177 | Monthly payments for car \$350 each month. | \$1,860.00        | \$33,000.00          | <ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul> |

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| 7.  | Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony. | artners; relatives of any ger<br>a control, or owner of 20% o  | neral partners; partne<br>or more of their voting | erships of which y<br>g securities; and a | ou are a genera<br>any managing a | al partner; corporations<br>gent, including one for |
|-----|---|--|---|---|-----------------------------------|---|
|     | ☐ Yes. List all payments to an insider.   |  |   |   |                                   |   |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                 | Amount you still owe                      | Reason for                        | this payment  |
| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost   |  | ments or transfer a                               | ny property on a                          | account of a de                   | ebt that benefited an                               |
|     | No  |  |   |   |                                   |   |
|     | ☐ Yes. List all payments to an insider  |  |   |   |                                   |   |
|     | Insider's Name and Address  | Dates of payment   | Total amount paid                                 | Amount you still owe                      | Reason for<br>Include cred        | this payment<br>itor's name                         |
| Pa  | rt 4: Identify Legal Actions, Repossessio   | ns, and Foreclosures   |   |   |                                   |   |
| 9.  | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number                |  |   |   |                                   | t or custody  |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  ☐ No. Go to line 11.  ☐ Yes. Fill in the information below.  |  | erty repossessed, f                               | oreclosed, garni                          | shed, attached                    | l, seized, or levied?                               |
|     | Creditor Name and Address   | Describe the Property  |   | Date                                      | •                                 | Value of the property                               |
|     |   | Explain what happened  |   |   |                                   |   |
|     | American Eagle Bank<br>556 Randall Rd.  | 2014 Chevrolet Trav  | erse 29000 miles                                  | Nov<br>201                                | ember                             | \$16,000.00   |
|     | South Elgin, IL 60177   | <ul><li>■ Property was repossessed.</li><li>□ Property was foreclosed.</li><li>□ Property was garnished.</li></ul> |   |   | o                                 |   |
|     |   | ☐ Property was attache   | d, seized or levied.                              |   |                                   |   |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment bed  No  Yes. Fill in the details.  |  | luding a bank or fir                              | nancial institutio                        | n, set off any a                  | mounts from your                                    |
|     | Creditor Name and Address   | Describe the action the  | e creditor took                                   | Date take                                 | action was                        | Amount  |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes   |  | erty in the possessi                              | ion of an assign                          | ee for the bene                   | fit of creditors, a                                 |

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Page 38 of 52 Document Case number (if known) Debtor 1 Rick Nelson Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Costello & Costello **Attorney Fees** \$1,500 plus \$1,835.00 19 N. Western Ave. (RT 31) court costs Carpentersville, IL 60110 paid prior to filing. Carpentersville, IL 60110

steve@costellolaw.com

**Summit Financial Education** 

\$9.95 for required credit counseling

\$9.95

Prior to filing.

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| <ul> <li>Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone when promised to help you deal with your creditors or to make payments to your creditors?         <ul> <li>Do not include any payment or transfer that you listed on line 16.</li> </ul> </li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> |   |  |                               |                | ty to anyone who  |   |
|---|---|--|-------------------------------|----------------|---|---|
|   | Person Who Was Paid Address   | Description and variansferred  | /alue of any prop             | erty           | Date payment or transfer was made                       | Amount of payment                             |
| 18.   | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No  Yes. Fill in the details. | ousiness or financial affa<br>ade as security (such as                 | airs?<br>the granting of a se |                |   |   |
|   | Person Who Received Transfer<br>Address<br>Person's relationship to you   | Description and v<br>property transfer                                 |                               |                | any property or<br>s received or debts<br>schange       | Date transfer was made                        |
| 19.   | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.  |  | ny property to a s            | elf-settled tr | ust or similar device o                                 | of which you are a                            |
|   | Name of trust   | Description and  | value of the prope            | erty transferi | red   | Date Transfer was made                        |
|   | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, asso   | cy, were any financial acou  | counts or instrur             | ments held in  |   |   |
|   | ■ No □ Yes. Fill in the details.  |  |                               |                |   |   |
|   | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  | Last 4 digits of account number  | Type of accoun instrument     | cle<br>me      | ate account was<br>osed, sold,<br>oved, or<br>ansferred | Last balance<br>before closing or<br>transfer |
| 21.   | Do you now have, or did you have within 1 cash, or other valuables?  No Yes. Fill in the details.   | year before you filed fo   | r bankruptcy, any             | safe deposi    | it box or other deposi                                  | tory for securities,                          |
|   | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)          |                               | Describe the   | contents  | Do you still have it?                         |
| 22.   | Have you stored property in a storage unit o  | or place other than you  | home within 1 y               | ear before y   | ou filed for bankruptc                                  | y?  |
|   | ☐ Yes. Fill in the details.   |  |                               |                |   |   |
|   | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                               | Describe the   | contents  | Do you still have it?                         |

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Debtor 1 Rick Nelson

| Par | t 9: Identify Property You Hold or Control for   | Someone Else  |        |                                   |                     |  |
|-----|--|---|--------|-----------------------------------|---------------------|--|
| 23. | Do you hold or control any property that someofor someone.   | one else owns? Include any prope  | rty yo | ou borrowed from, are storing fo  | r, or hold in trust |  |
|     | ■ No   |   |        |                                   |                     |  |
|     | Yes. Fill in the details.  |   |        |                                   |                     |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Des    | scribe the property               | Value               |  |
| Par | t 10: Give Details About Environmental Information   | ation   |        |                                   |                     |  |
| For | the purpose of Part 10, the following definitions  | apply:  |        |                                   |                     |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul | ir, land, soil, surface water, groun                                      | _      | •                                 |                     |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal   | sites.  |        |                                   |                     |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s  |   | s was  | ste, hazardous substance, toxic   | substance,          |  |
| Rep | ort all notices, releases, and proceedings that yo   | ou know about, regardless of whe  | n the  | y occurred.                       |                     |  |
| 24. | Has any governmental unit notified you that you  | u may be liable or potentially liable                                     | e und  | er or in violation of an environm | ental law?          |  |
|     | ■ No   |   |        |                                   |                     |  |
|     | Yes. Fill in the details.  |   |        |                                   |                     |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State ar<br>ZIP Code) |        | Environmental law, if you know it | Date of notice      |  |
| 25. | Have you notified any governmental unit of any   | release of hazardous material?  |        |                                   |                     |  |
|     | ■ No □ Yes. Fill in the details.   |   |        |                                   |                     |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) | nd     | Environmental law, if you know it | Date of notice      |  |
| 26. | Have you been a party in any judicial or adminis   | strative proceeding under any env   | vironn | nental law? Include settlements   | and orders.         |  |
|     | No   |   |        |                                   |                     |  |
|     | ☐ Yes. Fill in the details.  |   |        |                                   |                     |  |
|     | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Nat    | ture of the case                  | Status of the case  |  |
| Par | t 11: Give Details About Your Business or Con  | nections to Any Rusiness  |        |                                   |                     |  |
|     | <del></del>  | -   |        |                                   |                     |  |
| 27. | Within 4 years before you filed for bankruptcy,  |   | •      | <b>G</b>                          | y business?         |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                                    |   |        |                                   |                     |  |
|     | ☐ A member of a limited liability company  | (LLC) or limited liability partnersh                                      | hip (L | LP)                               |                     |  |
|     | ☐ A partner in a partnership   |   |        |                                   |                     |  |
|     | ☐ An officer, director, or managing execut   | tive of a corporation   |        |                                   |                     |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |   |        |                                   |                     |  |

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Case number (if known) Document Debtor 1 Rick Nelson

|  | No. None of the above applies. Go to  |  |   |
|--|---|--|---|
|  | ☐ Yes. Check all that apply above and fi  | Il in the details below for each business.   |   |
|  | Business Name<br>Address  | Describe the nature of the business  | Employer Identification number<br>Do not include Social Security number or ITIN.                                      |
|  | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper   | Dates business existed  |
| 28.  | Within 2 years before you filed for bankrup institutions, creditors, or other parties.  | tcy, did you give a financial statement to   | anyone about your business? Include all financial   |
|  | ■ No  |  |   |
|  | Yes. Fill in the details below.   |  |   |
|  | Name<br>Address<br>(Number, Street, City, State and ZIP Code)   | Date Issued  |   |
| Pa   | rt 12: Sign Below   |  |   |
|  |   |  |   |
| are<br>with  |   | false statement, concealing property, or   | I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both. |
| are<br>with<br>18 U  | true and correct. I understand that making a<br>n a bankruptcy case can result in fines up to<br>J.S.C. §§ 152, 1341, 1519, and 3571.<br>Rick Nelson  | a false statement, concealing property, or<br>\$250,000, or imprisonment for up to 20 ye                     | obtaining money or property by fraud in connection  |
| are<br>with<br>18 U<br>/s/<br>Ric  | true and correct. I understand that making and bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.   | false statement, concealing property, or   | obtaining money or property by fraud in connection  |
| are<br>with<br>18 U<br>/s/<br>Ric  | true and correct. I understand that making a<br>n a bankruptcy case can result in fines up to<br>J.S.C. §§ 152, 1341, 1519, and 3571.<br>Rick Nelson<br>ck Nelson<br>mature of Debtor 1   | a false statement, concealing property, or<br>\$250,000, or imprisonment for up to 20 ye                     | obtaining money or property by fraud in connection  |
| are with 18 to /s/ Ric Sig   | true and correct. I understand that making an a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.  Rick Nelson Ck Nelson Inature of Debtor 1  The November 14, 2016  You attach additional pages to Your Statem No   | statement, concealing property, or \$250,000, or imprisonment for up to 20 years Signature of Debtor 2  Date | obtaining money or property by fraud in connection<br>ears, or both.  |
| are with 18 U /s/ Rid Sig Dar Did Did Did Did  | true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.  Rick Nelson Ck Nelson Inature of Debtor 1  The November 14, 2016  You attach additional pages to Your Statem No Yes  You pay or agree to pay someone who is not    | Signature of Debtor 2  Date  ent of Financial Affairs for Individuals Fili                                   | obtaining money or property by fraud in connection<br>ears, or both.  ng for Bankruptcy (Official Form 107)?          |
| are with 18 U /s/ Rid Sig Da Did Did Did Did Did Did N Did Did N Did N Did N N N N N N N N N N N N N N N N N N N | true and correct. I understand that making a a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571.  Rick Nelson Ck Nelson Inature of Debtor 1  The November 14, 2016  You attach additional pages to Your Statem No Yes  You pay or agree to pay someone who is not No | Signature of Debtor 2  Date  ent of Financial Affairs for Individuals Fili                                   | obtaining money or property by fraud in connection ears, or both.  ng for Bankruptcy (Official Form 107)?  cy forms?  |

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|                                   |   |                       | •  |  |
|-----------------------------------|---|-----------------------|--|--|
| Fill in this infor                | mation to identify your                         | case:                 |  |  |
| Debtor 1                          | Rick Nelson                                     |                       |  |  |
|                                   | First Name                                      | Middle Name           | Last Name  |  |
| Debtor 2<br>(Spouse if, filing)   | First Name                                      | Middle Name           | Last Name  |  |
| United States Ba                  | ankruptcy Court for the:                        | NORTHERN DIS          | TRICT OF ILLINOIS, EASTERN DIVISION                        |  |
| Case number                       |   |                       |  |  |
| (if known)                        |   |                       |  | ☐ Check if this is an                                    |
|                                   |   |                       |  | amended filing   |
|                                   |   |                       |  |  |
| Official Fo                       | rm 108  |                       |  |  |
|                                   |   | n for Indiv           | iduals Filing Under Chap                                   | otor 7   |
| Statemen                          | it of intentio                                  | ii ioi iiidiv         | riduais Filling Officer Chap                               | 12/15  |
| If you are an ind                 | ividual filing under cha                        | nter 7 vou must fil   | Lout this form if:   |  |
|                                   | e claims secured by yo                          | -                     | out this form ii.  |  |
| _                                 | sed personal property a                         |                       | ot expired   |  |
|                                   |   |                       | you file your bankruptcy petition or by the date           | e set for the meeting of creditors.                      |
|                                   | ever is earlier, unless th                      |                       | e time for cause. You must also send copies to             |  |
|                                   | eople are filing together                       | r in a joint case, bo | th are equally responsible for supplying corre             | ct information. Both debtors must                        |
| Sigii ai                          | id date the form.                               |                       |  |  |
|                                   | and accurate as possib<br>our name and case nur |                       | s needed, attach a separate sheet to this form.            | On the top of any additional pages,                      |
|                                   |   | ,                     |  |  |
| Part 1: List Y                    | our Creditors Who Have                          | e Secured Claims      |  |  |
|                                   |   | art 1 of Schedule D   | : Creditors Who Have Claims Secured by Prop                | erty (Official Form 106D), fill in the                   |
| information be<br>Identify the cr | elow.<br>editor and the property t              | hat is collateral     | What do you intend to do with the property secures a debt? | that Did you claim the property as exempt on Schedule C? |
|                                   |   |                       |  | ·  |
| Creditor's A                      | American Eagle Bank                             |                       | ☐ Surrender the property.                                  | □No  |
| name:                             | illerican Lagie Bank                            | •                     | ☐ Retain the property and redeem it.                       | LI NO  |
|                                   |   |                       | Retain the property and enter into a                       | ■ Yes  |
| Description of                    |   | averse 29000          | Reaffirmation Agreement.                                   |  |
| property                          | miles   |                       | ☐ Retain the property and [explain]:                       |  |
| securing debt                     |   |                       |  |  |
|                                   |   |                       |  |  |
|                                   | Vife's car payment                              |                       | ☐ Surrender the property.                                  | □ No   |
| name:                             |   |                       | Retain the property and redeem it.                         | <b>=</b>   |
| Description of                    |   |                       | Retain the property and enter into a                       | ■ Yes  |
| property                          |   |                       | Reaffirmation Agreement.                                   |  |
| Proporty                          |   |                       | ☐ Retain the property and [explain]:                       |  |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

securing debt:

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| Debtor                        | r 1 <b>R</b>      | ick Nelson  | Case number (if known)  |
|-------------------------------|-------------------|---|---|
| Lessor                        |                   | ie:<br>f leased   | □ No  |
| Proper                        |                   | i leaseu  | ☐ Yes   |
| Lessor                        |                   | e:<br>f leased  | □ No  |
| Proper                        |                   | rieaseu   | ☐ Yes   |
| Lessor                        |                   | e:<br>f leased  | □ No  |
| Proper                        |                   |   | ☐ Yes   |
| Lessor                        |                   |   | □ No  |
| Proper                        |                   | f leased  | ☐ Yes   |
| Lessor                        |                   |   | □ No  |
| Proper                        |                   | f leased  | ☐ Yes   |
| Lessor                        |                   |   | □ No  |
| Descrip<br>Proper             |                   | f leased  | ☐ Yes   |
| Lessor                        |                   |   | □ No  |
| Proper                        |                   | f leased  | ☐ Yes   |
| Part 3:                       | Sig               | n Below   |   |
| Under <sub>I</sub><br>propert | penalt<br>ty that | y of perjury, I declare that I have indicated is subject to an unexpired lease. | my intention about any property of my estate that secures a debt and any personal |
| X /s                          | s/ Ricl           | k Nelson  | x   |
|                               | Rick N<br>Signatu | elson<br>re of Debtor 1   | Signature of Debtor 2   |
| D                             | ate               | November 14, 2016   | Date  |

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-36354 B2030 (Form 2030) (12/15)

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Desc Main

### Document Page 48 of 52 United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re                     | Rick Nelson  |  | Case N   | o.   |                                |
|---------------------------|--|--|--|--|--------------------------------|
|                           |  | Debtor(s)  | Chapte   | r 7  |                                |
|                           | DISCLOSURE OF COMPENSA   | TION OF ATTO   | DRNEY FOR  | DEBTOR(S)  |                                |
| c                         | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in   | ne petition in bankrupte   | cy, or agreed to be p  | aid to me, for services re   | ndered or to                   |
|                           | For legal services, I have agreed to accept  |  | <b>\$</b>  | 1,500.00   |                                |
|                           | Prior to the filing of this statement I have received  |  | <b> \$</b>   | 1,500.00   |                                |
|                           | Balance Due  |  |  | 0.00   |                                |
| 2. T                      | he source of the compensation paid to me was:  |  | •  |  | •                              |
|                           | ■ Debtor □ Other (specify):  |  | <b>.</b><br>   |  |                                |
| 3. Т                      | he source of compensation to be paid to me is:   |  | •  |  |                                |
|                           | ■ Debtor □ Other (specify):  | . *  |  |  |                                |
| 4. I                      | I have not agreed to share the above-disclosed compensation  | on with any other person   | on unless they are m   | embers and associates of   | f my law firm.                 |
| 5. I<br>a<br>b<br>c.<br>d | I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of a return for the above-disclosed fee, I have agreed to render less and the statement of the debtor's financial situation, and rendering as the Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed]  Exemption planning;  y agreement with the debtor(s), the above-disclosed fee does a Representation of the debtors in any discharge any other adversary proceeding: negotiations filling of reaffirmation agreements and applications. | the people sharing in the gal service for all aspective to the debtor in dof affairs and plan which confirmation hearing, not include the following ability actions, just with secured creditions as needed; present aspections as needed; present aspections as needed; present aspections as needed; | he compensation is a<br>ects of the bankrupto<br>etermining whether<br>ch may be required;<br>and any adjourned I<br>mg service;<br>dicial lien avoida<br>itors to reduce to | extracted.  Ty case, including:  To file a petition in bankinearings thereof;  The case of | ruptcy;  actions or ration and |
|                           | USC 522(f)(2)(A) for avoidance of liens on hou   | RTIFICATION  | <b>-</b>   |  |                                |
| this ba                   | certify that the foregoing is a complete statement of any agree nkruptcy proceeding.   | ement or arrangement f   | or payment to mo-fo  | representation of the de   | ebtor(s) in                    |
| Da                        | vember 14, 2016<br>te  | Stephen 4 Cos<br>Signature of Attor<br>Costello & Cost<br>19 N. Western A<br>Carpentersville<br>847-428-4544   | \ve. (RT 31)<br>, IL 60110   |  |                                |

#### **CONTRACT FOR LEGAL SERVICES**

The undersigned (hereinafter referred to as "client") hereby enters into this Contract for legal services with the law firm of COSTELLO & COSTELLO P.C. (Hereinafter referred to as "firm") and hereby agrees as follows:

- 1. Client wishes to retain the law firm of COSTELLO & COSTELLO, P.C. to perform legal services in connection with a Chapter 7 Bankruptcy.
- 2. Firm's present schedule of fees regarding the preparation, filing and representation in Chapter 7 and the court filing fee for the following services are as follows:

| a. Analysis of qualification for Chapter 7 (means test) - which shall mean that firm shall render an opinion of whether client qualifies for filing Chapter 7 under or if the filing of a chapter 7 for client would constitute | \$<br>500.00   |
|---|----------------|
| an abuse of the provisions of Chapter 7 pursuant to Title 11 United States Code section 707(b).   |                |
| b. Preparation of documents for Chapter 7 filing which includes, the<br>petition, schedules, statement of financial affairs, notice of intent, and<br>other documents required for the filing of the chapter 7.                 | \$<br>500.00   |
| <ul> <li>c. Filing of Chapter 7 petition, schedules, etc with the court and<br/>attendance at the meeting with the trustee (also called 341 meeting or<br/>meeting of creditors).</li> </ul>                                    | \$<br>500.00   |
| d. Court filing fee.  | \$<br>335.00   |
| Total fees and court filing fee.  | \$<br>1,835.00 |

- 3. Client hereby understands that firm will not perform any of the above services until the fees for such service, including court costs or filing fees, is fully paid and only after all information and/or documents and/or signatures required for such services and/or the preparation of each document is provided to firm. Firm reserves the right to raise the amount of firm's fees for any services should client not pay for such services or provide necessary information or documents or signatures within a reasonable time from the date of this Contract or should the bankruptcy laws, or rules or procedures of the court materially change after the date of this Contract. Client further understands that any fees are deemed earned when paid and client shall not be entitled to any refund of any portion of any fees paid for services performed by firm or if firm is unable to fully provide any such services due to failure of client to provide necessary information or documents or signatures.
- 4. Firm is under no obligation to represent client in any additional matters including any additional matters arising within the Chapter 7 proceeding or any other Chapter that this Chapter 7 proceeding may be converted into. Should firm choose to represent client in any additional matters arising within the chapter 7 proceeding or other bankruptcy proceeding that this Chapter 7 may be converted into including, but not limited to, objections to claims, adversary proceedings, amendments to schedules, petition or statement of affairs, motions or objections presented by creditors, trustee or Judge or other matters, shall be billed at the rate of \$275.00 per hour plus costs and expenses. Such additional fees shall be due and payable upon demand unless otherwise agreed in writing. Firm reserves the right to raise its hourly rate upon written notice to client.
- 5. Client will inform firm of any change of client's address or telephone number with the understanding that failure to do so will constitute default.
- 6. Client agrees to inform firm of any difficulties client may have in complying with this Contract and that this Contract may be altered changed or amended only by mutual agreement and approval by firm in writing

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- 7. Client may terminate employment of firm at any time but such termination will not alter any rights or duties under this Contract and such termination does not reduce the amount owed to firm except by agreement in writing.
- 8. Client understands that any default under paragraph 4,5, 6, or 7 or should client fail to fully cooperate with firm or fail to provide accurate or complete information to firm or any trustee, judge, creditor or other claimant or any other entity at any time during firm's representation of client either before or after the filing of the chapter 7 bankruptcy, such may result in withdrawal by firm but such withdrawal will not alter any clients obligations under this Contract and such withdrawal does not reduce the amount owing to firm except by agreement in writing and does not entitle client to any refund of any fees paid for such services.
- 9. Client agrees that client is responsible for all costs of collection, including all court costs and reasonable attorney's fees incurred by firm in the collection of any sums due hereunder.
- 10. Client understands that from time to time an attorney from firm may be unavailable to appear in court or at other proceedings on client's behalf and hereby agrees that another attorney may be designated by firm to substitute for one of firm's attorney's at such court or other hearing.
- 11. To the extent that this Contract is signed herebelow by more than one individual, then "client" as used herein shall mean both the singular and plural of such term and both individuals agree that they are jointly and severally liable for all obligations contained herein including but not limited to all sums due from client as provided herein.
- 12. If client is a corporation and is signed herebelow by an officer of such corporation, then such person signing for client represents that he or she is a duly authorized officer of such corporation and is authorized to enter into this Contract on behalf of such corporation and bind such corporation thereto and further agrees that he or she personally and individually guarantees payment of all amounts due from client as provided herein including but not limited to all fees, costs and expenses provided in paragraph 2 hereinabove and further agrees that he or she is responsible for all costs of collection, including all court costs and reasonable attorney's fees incurred by firm in the collection of any sums due hereunder from either client or such person signing personally and individually.
- 13. Any provision of this Contract which may be adjudged to be unlawful or invalid by a court of law or becomes unlawful or invalid by operation of law or legislation, shall thereafter become null and void, but all other provisions of this Contract shall continue in full force and effect.

The undersigned have voluntarily entered into this Contract and by the undersigned's signature(s) below agree to all of the obligations rights and duties herein.

Dated this 14th day of November ,2016.

Agreed and signed:

Rick Nelson

Costello, & Costello, P.C. and Stephen J. Costello

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### United States Bankruptcy Court Northern District of Illinois, Eastern Division

| In re | Rick Nelson                                  | Debtor(s)                                       | Case No. Chapter 7         |                |
|-------|--|---|----------------------------|----------------|
|       | VER  | RIFICATION OF CREDITOR M                        | ATRIX                      |                |
|       |  | Number of                                       | Creditors:                 | 25             |
|       | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credite        | ors is true and correct to | the best of my |
| Date: | November 14, 2016                            | /s/ Rick Nelson Rick Nelson Signature of Debtor |                            |                |

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American Eagle BankAmerican Eagle BankBEST BUY/CBNA556 Randall Rd.556 Randall Rd.PO BOX 6497South Elgin, IL 60177South Elgin, II. 60177Sioux Falls, SD 57117

CAPITAL ONE BANK USA CAPITAL ONE BANK USA CAPITAL ONE/ MENARDS

PO BOX 30281 PO BOX 30281 PO BOX 30253

Salt Lake City, UT 84130 Salt Lake City, UT 84130 Salt Lake City, UT 84130

COMMERCE BANK COMMERCE BANK CREDIT ONE BANK
PO BOX 411036 PO BOX 411036 PO BOX 98872
Kansas City, MO 64141 Kansas City, MO 64141 Las Vegas, NV 89193

DISCOVER FINANCIAL SERVICES Exxon Mobile/Citibank Kay Jewelers

PO BOX 15316 PO Box 6497 PO Box 3680 WILMINGTON, DE. 19850 Sioux Falls, SD 57117 Akron, OH 44309

MERRICK BANK MERRICK BANK SHELL/CITIBANK CBNA PO BOX 1500 PO BOX 6497 Draper, UT 84020 Draper, UT 84020 Sioux Falls, SD 57117

SYNC/TORO CONSUMER SYNCB/CARE CREDIT SYNCB/HH GREGG
PO BOX 965036 C/O P O BOX 965036 C/O P O BOX 965036
Orlando, FL 32896 Orlando, FL 32896 Orlando, FL 32896

SYNCB/LA-Z-BOY FURNITURE SYNCB/PAYPAL EXTRAS MASTERCARD SYNCB/SAMS CLUB

PO BOX 965036 PO BOX 965005 PO BOX 965005 Orlando, FL 32896 Orlando, FL 32896 Orlando, FL 32896

SYNCB/WAMART CREDIT CARD TD Bank USA/Target Credit Wife's car payment

PO BOX 965024 PO BOX 673
Orlando, FL 32896 Minneapolis, MN 55440

WORLDS FOREMOST BANK/CABELAS VISA 4800 NW 1ST ST. STE 300

Lincoln, NE 68521